

# “Making Cancer History”

## Options for Giving

All gifts are deductible on federal tax returns subject to the limits allowed by the IRS. MD Anderson Cancer Center’s tax number for charitable purposes is 74-6000203. MD Anderson also has options for deductions to 501(c)3 organizations.

To donate:

### 1. By Check

Please make check payable to **MD Anderson Cancer Center**. Indicate **Team “Making Cancer History”** on the memo line. Send the check to:

Development Office - 541  
University of Texas MD  
Anderson Cancer Center  
c/o Lesley Icenogle  
P. O. Box 301439  
Houston, Texas 77230-1439

**or**

Team “Making Cancer History”  
c/o Daniel Rudge  
6123 Sienna Arbor Lane  
Houston, Texas 77041-6038

### 2. Online

Please follow the step-by-step instructions that follow to donate online through MD Anderson’s secure website.

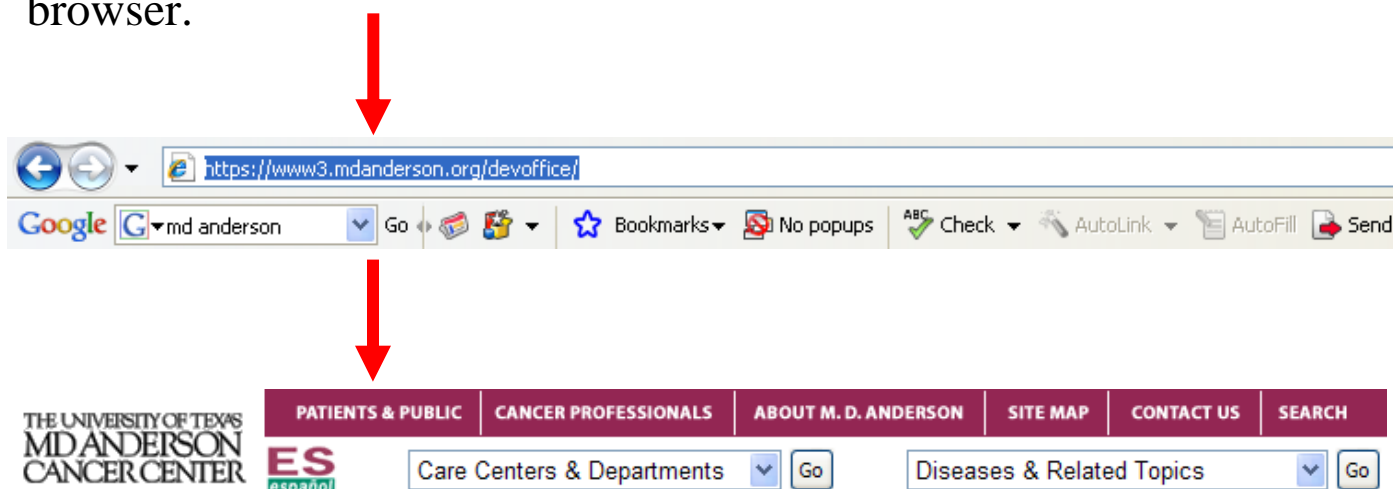
Please note, **if you choose to give online or to send your donation directly to MD Anderson (Lesley Icenogle) please send an email to Daniel Rudge** at:

d\_p\_rudge@yahoo.com **or** daniel.rudge@shell.com

This will allow me to thank you directly and to record the amount raised on an ongoing basis, since I will not be notified of your donation by MD Anderson until after the event.

# “Making Cancer History”

Give “online” through MD Anderson’s secure website. Enter the URL <https://www3.mdanderson.org/devoffice/> into your web browser.



## Making a Donation

### Donate Now

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### To Make a Gift Now

Your gift to M. D. Anderson Cancer Center will make a difference in the lives of cancer patients now and in the future by supporting innovative cancer patient care, research, education and prevention programs at one of the world's most outstanding comprehensive cancer centers.

Please select an option of the type of donation you would like to make.

#### Memorial/Honor Online Donation [GO ▶](#)

Honor someone special or remember a loved one with your contribution.

#### General Online Donation [GO ▶](#)

Contribute to M. D. Anderson Cancer Center.

#### Mail-In Donation [GO ▶](#)

Contribute by printing this form and mailing it with a check.



**Select** General Online Donation [GO ▶](#) and follow 5 simple steps to make your donation!

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### General Online Donation

Please fill out the form below to make an online credit card donation to M. D. Anderson Cancer Center. Fields with an asterisk (\*) are required in order to process your transaction. If you wish to pay by check, please complete our [Mail-In Donation](#) form and mail it in along with your check made payable to The University of Texas M. D. Anderson Cancer Center. To make a gift online in honor or memory of someone special, please use our [Memorial/Honor Online Donation Form](#).

This gift is from...

Individual  Corporation

*if "individual"*

Title:  Mr.  Ms.  Mrs.  Miss  Dr.

\* First Name:

Middle Initial:

\* Last Name:

Suffix:

*if "corporation"*

\* Corporation:

Contact Name:

(If we have a question regarding this donation.)

\* Is this a joint donation with  Spouse  Other  Not a joint donation

If this is a joint donation. Please identify the name(s) of joint donor(s) (e.g. Mrs. Sally Smith; the Smith family; The Employees of ABC Corporation, etc.).

E-mail Address:

( For immediate e-mail confirmation, please enter your e-mail address above. )

\* Daytime Phone Number:

Example: (713-555-1212)

\*Is this address  Home  Business

\* Address 1:

Address 2:

\* City:

\* State:

\* Zip Code:

\* Country:

**Step 1:**  
Complete your  
personal details



**Step 2:**  
Specify  
RAAM2008

**\* Please Use My Gift For...**

- Annual Fund (use my gift where it is most needed)
- Patient Assistance
- Education
- Prevention
- Research (general)

Specific fund or program, specify below \* (e.g. lung cancer research)

\* (please specify):

**Step 3:**  
Specify the  
amount you  
wish to give

**\* I Would Like To Contribute...**

- \$250
- \$100
- \$50
- \$25
- Other (\$10 minimum) \$  .00

Note: Please enter numbers only. No comma or other special characters.

**Step 4:**  
Provide your  
card details

**My Credit Card Information...**

\* Credit Card Type:

\* Credit Card Number:

Example: (1111222233334444)

\* Expiration Date:  /

\* Credit Card Verification #:

[Click HERE for CCV/CID Helpful Hints](#)

\* Card Holder Last Name:

(As it appears on your credit card)

\* Card Holder First Name:

(As it appears on your credit card)

\* Is this card a . . .

- Individual Card?
- Corporate Card?

\* Is the billing address of this credit card the same as in the donor information above?

- Yes
- No

If No, please enter a billing address for this credit card.

Address 1:

Address 2:

City:

State:

Zip Code:

Country:

**Please Inform Me If My Company (Or My Spouse's Company) Has A Matching Gift Program...**

Company Name:

Company Name (Spouse):

**Step 5:**  
Click "Continue"

Please allow 3 to 5 business days for processing your gift. Thank you.

**Thank you!**

If you have questions or need assistance, please call the M. D. Anderson Development Office at (713) 792-3450 or (800) 525-5841 Monday - Friday 7am - 5pm (CST).